

Connecticut Department of Public Health

Testimony Presented Before the Appropriations and Public Health Committees

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Preventive Health and Health Services and the Maternal and Child Health Services

Block Grants

Good morning, my name is Janet Brancifort and I am Deputy Commissioner of the Department of Public Health. I am here to present the Department's proposed FFY 2016 Allocation Plans for the Preventive Health and Health Services Block Grant and the Maternal and Child Health Services Block Grant.

In 1981, Congress established the Preventive Health and Health Services Block Grant (PHHSBG) to replace six separate categorical grants previously allocated to states to reduce preventable morbidity and mortality. The criterion for the grant is that funds be used to support initiatives consistent with achieving *Healthy People Objectives*. These national, science-based objectives span ten years with the overall goal of improving the health of all Americans.

Each year in the past four years, President Obama eliminated PHHSBG funds in his

budget request to Congress. However, in each of these years, Congress has taken

action to ensure Block Grant funding is restored. Therefore, the proposed FY 2016

funding estimate for Connecticut is based on the FFY 2015 funding level of \$2,203,907.

Thus, the estimated FFY 2016 allocation will include a basic award of \$2,123,993, in

addition to, a mandated Sex Offense Set-Aside of \$79,914 to provide rape crisis

services to rape victims. The Department has a contingency plan in place should an

increase or reduction occur. As mandated by federal legislation, the Department would

present options to the State's Preventive Block Grant Advisory Committee and modify

allocations based on Committee recommendations. In addition, a public hearing will be

held to include public recommendations regarding proposed allocations.

In Connecticut, this Block Grant supports an array of public health initiatives at both the

state and local levels. However, overall the health priorities and program categories for

FY 2016 remain the same as in FY 2015, with the following exceptions:

1) Administrative Support has been significantly increased to cover the cost of a full-

time PHHSBG Grant Coordinator position;

2) Cardiovascular Disease, which supports Connecticut's HEARTSafe Program, has

reduced as the program been widely disseminated throughout Connecticut's cities and

towns;

3) Surveillance and Evaluation is decreased as the Culturally and Linguistically

Appropriate Services Standards Coordinator's work, and the exploration of a

methodology to conduct small area estimates using Behavioral Risk Factor Surveillance

Survey data were completed in FFY 2015; and

4) Nutrition and Weight Status is decreased as the .50 F.T.E. nutritionist position

approved in the FY 2015 Allocation Plan will be assumed by another federal grant.

In regards to the Maternal and Child Health Services Block Grant (MCHBG) Allocation

Plan, the MCHBG promotes the development of service systems in states to meet

critical challenges in:

reducing infant mortality;

providing and ensuring access to comprehensive care for women;

promoting the health of children by providing preventive and primary care

services;

increasing the number of children who receive health assessments and treatment

services; and

providing family centered, community based, coordinated services for children

and youth with special health needs (CYSHCN).

Per federal requirements, at least 30 percent of funds must be used for prevention and

primary care services, and at least 30 percent must be used for children and youth with

special health needs. There are a number of other administrative requirements that are

referenced in the Allocation Plan. The Department is in compliance with all Block Grant

requirements.

A variety of services are provided with MCHBG funds that meet the objectives as

outlined in the Allocation Plan. These include case management services for pregnant

women, MCH information and referral services (2-1-1), family planning, oral health,

school-based primary and behavioral health, infant health and well-being, newborn

screening, and medical homes for children and youth with special health care needs.

The MCHBG has a proposed FFY 2016 budget of \$4,912,449, which includes an

estimated federal allocation of \$4,580,696 plus an estimated carry forward from FFY

2014 of \$331,753.

The proposed Allocation Plan incorporates precautionary measures in the event that the

actual FFY 2016 federal award amount is decreased. Unobligated carry forward funds

would be used to minimize the impact of any reduction upon community-based

programs so as to mitigate any impact upon services to clients.

Thank you and I appreciate your consideration of these Block Grant Allocation Plans. If

you have any questions, agency staff and I will be happy to answer them.